



**State of Rhode Island  
Department of Administration / Division of Purchases  
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**Solicitation Information  
March 20, 2014**

<b>ADDENDUM # 1</b>
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**RFP # 7548550**

**RFP Title: RI Behavioral Healthcare Analysis and Report Project**

**Bid Opening Date & Time: Thursday, April 3, 2014 at 10:30 AM (Eastern Time)**

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**Notice to Vendors:**

ATTACHED ARE VENDOR QUESTIONS WITH STATE RESPONSES.

NO FURTHER QUESTIONS WILL BE ANSWERED.

**David J. Francis  
Interdepartmental Project Manager**

*Interested parties should monitor this website, on a regular basis, for any additional information that may be posted.*

**Vendor Questions for RFP # 7548550 RI Behavioral Healthcare Analysis and Report Project**

Question 1: By when does the state expect the project's deliverables to be completed?

Answer to question 1: **March 1, 2015**

Question 2: What will be the process for state review and approval of the deliverables, and which entity/body will ultimately approve the deliverables?

Answer to question 2: **The contract is issued by EOHHS and will have staff supervision from OHIC, EOHHS, and Health. The Health Care Planning & Accountability Advisory Council and its co-chairs will ultimately approve the deliverables.**

Question 3: Can the state elaborate on any relationship between this project and the following: RFP#7537373  
TITLE: Total Cost of Care / Drivers of Medical Spending

Specifically:

1. Does the state expect for the two project teams to collaborate on data collection and analysis?
2. Will outputs from the total cost of care project be used in this project (or vice versa)?
3. Does the state intend to award the contract for both projects to the same organization?

Answer to question 3:

**1. The teams will have limited coordination responsibilities. Though the projects are separate, we would expect that if one report come to a different material, factual conclusion from the other (for instance, the amount of money spent on BH services in RI), the teams would work together to understand the respective methodologies and articulate why the results are different. The vendors will receive the same base sources of claims data but can supplement as needed to meet the project deliverables.**

**2. It is not required nor explicitly envisioned that one report use the other's conclusions as inputs but we would not preclude such collaboration from happening if the pieces reinforced each other, integration required a trivial amount of work, and such integration would add material value to the respective projects.**

**3. No.**

Question 4: Must bidders include a MBE/WBE in their proposals, or will demonstrating that significant effort was made to secure a MBE/WBE be sufficient to meet this RFP requirement?

Answer to question 4: **Only the successful vendor is required to submit a MBE plan to the MBE compliance officer. For further information visit the website [www.mbe.ri.gov](http://www.mbe.ri.gov) .**

Question 5: Is the MBE/WBE target tied to hours or \$?

Answer to question 5: **Only the successful vendor is required to submit a MBE plan to the MBE compliance officer. For further information visit the website [www.mbe.ri.gov](http://www.mbe.ri.gov) .**

Question 6: Has the state been able to “index” some or all of the data sources listed in Section 3 such that there is a way of linking records from various data sources to the same client/beneficiary/patient and provider? If so, for which data sources have these indices/linkages been established?

Answer to question 6: **The CSI-RI (state’s PCMH) database does have hashed, scrambled identifiers that link members within a payer but not across payers.**

Question 7: Will the state provide a single point of contact that can facilitate setting up meetings with key stakeholders, including data providers, and (if needed) expedite collection of data and responses to project team requests for clarification on issues related to data completeness, integrity and quality?

Answer to question 7: **Yes.**

Question 8: Can the state be more precise on the following:  
- The # of meetings in which the project’s deliverables and associated findings will be presented. **3-4**

The # of interim reports and/or presentations that will have to be produced as part of this project.

Answer to question 8: **One interim and one final report; 2-3 presentations with accompanying PowerPoints or handouts**

Question 9: For the technical proposal, do you want six pages to cover all technical issues (see page 12)?

- a. If not, what is the maximum application length?
- b. What is and is not included in this page limit?
- c. What are the page limits for each of the five technical proposal sections?
- d. Are the budget page and narrative both included in the technical proposal total?

Answer to question 9: **Please disregard the 6-page limit on page 12. The entire five-part technical proposal should be, but is not required to be, less than 20 pages. There are no page limits for each of the sections. No, the budget page and narrative are not included in the technical proposal.**

Question 10: What are the formatting requirements for the application? Including:

- e. Font
- f. Font size
- g. Line spacing
- h. Margins

Answer to question 10: **No explicit formatting instructions**

Question 11: Resumes/CVs:

- a. Are they included in the page total?
- b. Is there a way in which these are to be formatted and/or a form that should be used?
- c. Is there a maximum page length for each resume/CV?

Answer to question 11:

- a. **No**
- b. **No**
- c. **No**

Question 12: Are there any already-existing due dates by which any of the data analyses and/or specific deliverables are already due to other parties?

Answer to question 12: **No**

Question 13: Does a bidder need to obtain and sign a HIPAA Business Associate Agreement at the time that the application is submitted or upon receipt of award?

Answer to question 13: **No, only the successful vendor is required to sign a HIPAA Business Associate Agreement.**

Question 14: The RFP states, “The budget should include fully loaded individual hours per deliverable including levels of effort of staff.” The budget form, however, seems to request staff budgets and FTE relative to the scope of the entire project rather than deliverable by deliverable? The latter instruction is a bit unclear.

Answer to question 14: **Please use one budget sheet per deliverable and a separate budget sheet to sum the total hours/level of effort**

Question 15: Do you want the firm’s EEOC policy included in the application?

Answer to question 15: **No, only the successful vendor is required to submit an EEO plan to the EEO compliance officer**

Question 16: Does the vendor have to include documentation regarding the inclusion of a minority-owned business or having applied for a waiver for this requirement at the time that the application is submitted or upon receipt of award?

Answer to question 16: **Upon receipt of award**

Question 17: The solicitation suggests some data sources for answering the questions of interest to RI, but it is unclear whether there will be provisions made for database administration staff at each of the partner agencies that house data [i.e., Rhode Island Department of Health (HEALTH), the Department of Behavioral Health, Developmental Disabilities, and Hospitals (BHDDH), and the Office of the Health Insurance Commissioner (OHIC)]. Will provisions be made for database administration staff time?

Answer to question 17: **The partner agencies will work closely with the staff on this project to provide necessary data in a timely manner**

Question 18: Are there currently cooperative agreements, memorandums of understanding, or data sharing agreements in place between the partners providing this opportunity and the other agencies suggested as possible data providers (e.g., the Department of Education)?

Answer to question 18: **No, there are not explicit agreements between agencies outside of EOHHS/Health and OHIC.**

Question 19: Does the funding for this work originate at the Federal level or is it coming directly from the State?

Answer to question 19: **Funding for this work is a combination of state and federal sources.**

Question 20: What is the current status of the All Payer Claims Database in Rhode Island (i.e., number of years of data, number of payers, number of enrollees, and quality of the data)? Will this Database be available for use in this analysis?

Answer to question 20: **The APCD will not be a source of data for this project.**

Question 21: Are vendors allowed to include the cost of purchasing data in their proposals?

Answer to question 21: **Yes.**

Question 22: Can the State provide an estimate for the amount of in-person meetings that are required?

Answer to question 22:

**2-3 meetings with the full HCPAAC**

**Kickoff meeting**

**2-3 in-person staff and Principal meeting**